SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County Planning and Zoni PO Box 58 Washburn, WI 54 (715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

Perm/CHIERED

Section Cownship Company W. Range Company	1/4, 1/4 Gov't Lot Lot(s)	PROJECT Legal Description: (Use Tax Statement) Procedure.	Authorized Agent: (Person Signing Application on behalf of Owner(s))		8		TARGE HILLYANSON	Owner's Name: DOROTH HOFF TO PU	TYPE OF PERMIT REQUESTED-> LAND USE SANITARY	NOCKS are made payable to: Bayrieid County Zonnig Department. NO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.	NSTRUCTIONS: No permits will be issued until all fees are paid.	(715) 373-6138	Washburn, WI 54891	Planning and Zoning Depart
N Town of:	CSM Vol & Page Lot(s) No. Block(s) No. 627 660 3/6	PIN: (23 digits) 04-010-2-51-06-29-40509	Agent Phone: Agent Mailing Address (include City/State/Zip):	Contractor Phone: Plumber:	HERSTER, WI 54844		USAMIT NASIN	Mailing Address: City/State/Zip:	☐ PRIVY ☐ CONDITIONAL USE ☐		Bayfield Co. Zoning Dept.	SEP 112013 19 01	S	
Lot Size Acreage	o. Subdivision:	Volume (2(21) Page(s) 3/4	1	Plumber Phone:	844 6123607255	Cell Phone:	715 742 3462	Telephone:	SPECIAL USE B.O.A. DOTHER	HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/asp)	Refund:	9-18-13	Amount Paid:	Date:\/ \\ \/\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\

S9060 E.

Section 39

X Shoreland

X is Property/Land within 1000 feet of Lake, Pond or Flowage If yes--continue

Distance Structure is from Shoreline:

Is Property in Floodplain Zone?

Are Wetlands
Present?

Ves

No

☐ Is Property/Land within 300 feet of River, Stream (Incl. Internit Creek or Landward side of Floodplain? If yes—continue

trent.

Distance Structure is from Shoreline : feet

Proposed Construction:	Existing Structur					(B)	Conversion	ĵ		Value at Time of Completion * include donated time & material	U WOII SHOTE BILLIO
action.	Existing Structure: (if permit being applied for is relevant to it)			Property	□ Run a Business on :	Relocate (existing bldg)	☐ Conversion	lteration	> New Construction	Project (what are you applying for)	
	r is relevant to it)			□ Foundation	□ No Basement	□ Basement	□ 2-Story	1-Story + Loft	X1-Story	# of Stories and/or basement	
length:	Length:							🔀 Year Round	□ Seasonal	Use	
٠ `		C	NAPS X	in and	X None		 w		□ 1	# of bedrooms	
Migh: L,	Width: Hei		□ None	☐ Compost Toilet	☐ Portable (w/service contract)	☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)	Sanitary (Exists) Specify Type:	2 (New) Sanitary Specify Type:	☐ Municipal/City	What Type of Sewer/Sanitary System Is on the property?	
Height	Height:					200 gallon)	IFY Type: H. JAZK	Xwell	☐ City	Water	

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SEP 2 0 2013 Special U	X			Bac'd for legiance (1) //Accesson			□ Mobile H	☐ Bunkhous	☐ Commercial Use				Residential Use		☐ Residence	☐ Principal	Proposed Use	
Conditional Use; (explain)		Special Use: (explain) ADDVOR		Accessory Building Addition/Alteration (specify)	Accessory Building (specify) 510/744	Addition/Alteration (specify)	Mobile Home (manufactured date)	Bunkhouse w/ (\square sanitary, or \square sleeping quarters, or \square cooking & food prep facilities)	with Attached Garage	with (2 nd) Deck	with a Deck	with (2 nd) Porch	with a Porch	with Loft	Residence (i.e. cabin, hunting shack, etc.)	Principal Structure (first structure on property)	Proposed Structure	
	_	()		_	_	_	_	~	_	_	_	_	_	_	_	_		
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FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

[(we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which above described opening at any repening county ordinances to have access to the above described opening at any repening time for the purpose of inspection.

Owner(s):

Owner

Authorized Agent: are signing on behalf of the owner(s) a letter of authorization must $\mathcal{P} = \mathcal{P} = \mathcal{P} = \mathcal{P}$ of authorization must accompany this application)

s listed on the Deed All Owners must sign or letter(s)

Address to send permit 89060

M

ROMANS

Owner(s); / (W)

(If yo must acc ompany this application)

HERBSTER,

54844 ENS

Date

Date Jep

SON/

E, W, 54844 Attach
Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

Show / Indicate:

Show Location of (*):

Proposed Construction

North (N) on Plot Plan

(*) Driveway and (*) Frontage Road (Name Frontage Road)

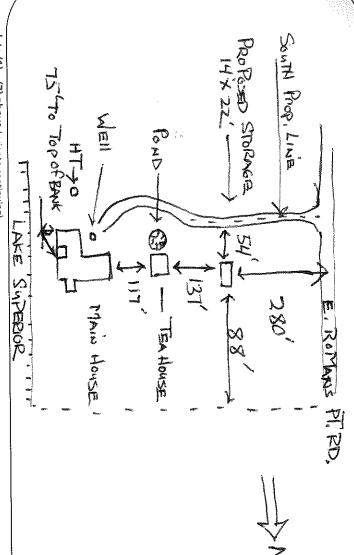
All Existing Structures on your Property

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)

(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond

(*) Wetlands; or (*) Slopes over 20%

Show any (*): Show any (*):



Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

Setbacks: (measured to the closest point)

Description	Measurement	 Description	Measurement	m l
			,434	
Setback from the Centerline of Platted Road	280 Feet	Setback from the Lake (ordinary high-water mark)	400	Feet
Sethack from the Established Right-of-Way	Feet	Setback from the River, Stream, Creek		Feet
		Setback from the Bank or Bluff	348	Feet
Setback from the North Lot Line	SS Feet			
Setback from the South Lot Line	54 Feet	Setback from Wetland		reet
Setback from the West Lot Line	2 80 Feet	Setback from 20% Slope Area		Feet
Setback from the East Lot Line	Feet	Elevation of Floodplain		1994
Setback to Septic Tank or Holding Tank	311 Feet	Setback to Well	087	Feet
Setback to Drain Field	Feet			
Setback to Privy (Portable, Composting) Feet	Feet			

Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

other previously surveyed comer or marked by a licensed surveyor at the

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code

The local Town, Village, City, State or Federal agencies may also require permits.

Date of Inspection: 9,19,15 Condition(s):Town, Committee or Board Issuance Information (County Use Only) Hold For Sanitary: Granted by Variance (B.O.A.) Permit #: Permit Denied (Date) Condition(s):Town, Comm Inspection Record: Is Parcel in Common Ownership
Is Structure Non-Conforming Signature of Inspector: Was Parcel Legally Created Was Proposed Building Site Delineated 2000 is Parcel a Sub-Standard Lot びた。 A **でまたり** THE SEA SANAK CARO Z Case #: Hold for TBA: at the state of Yes □ No Yes □ No onditions Attached? □ Yes □ No トカア + PROPERTY 7 0 Sanitary Number: Permit Date: Reason for Denial: つなれるころであ Ropestar Hold For Affidavit: No 51-00-10 2 Human HABITATUM. 风流 Mitigation Required Mitigation Attached Previously Granted by Variance (B.O.A.)

☐ Yes ☐ No Were Property Lines Represented by Owner
Was Property Surveyed 会が収入る Sandard 3 Hold For Fees: ା Yes 古 A S Case #: なるが Affidavit Required Affidavit Attached Standar Stan Aresald says Zoning District ([2-])
Lakes Classification (22.5) Date of Re-Inspection: 7 Date of Approval るとなったの CH. □ Yes

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEETO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
[715] 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received) SEP Salowa 2013 Factor and TT

Permit #: Amount Paid: 13-430g 0 9-16-13

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
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Transport Control of the Control of					ure on property)	truc	Principal (
Square Footage	Dimensions	D:		re S	Proposed Structure			`	Proposed Use
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M Well	Specify Type:	i i	☐ (New) Sanitary			1-Story + Loft	Addition/Alteration	dition/a	
□ City		7	☐ Municipal/City	1	Seasonal	St 1-Story	riction	New Construction	materiai
Water	e of y System perty?	What Type of Sewer/Sanitary System Is on the property?		# of bedrooms	Use	# of Stories and/or basement	Project (What are you applying for)	Project are you app	ion e &
									Non-Shoreland
X No	¥ No	feet	Structure is from Shoreline :	Distance St	If yescontinue	☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage If yescontinue	/Land within	Property,	Į
Present?	Floodplain Zone?	feet			continue	Creek or Landward side of Floodplain? If yescontinue	ward side of	k or Lanc	Shoreland
Are Wetland	Is Property in	ine:	ructure is from Shoreline	Distance Structure	n (incl. Intermittent)	300 feet of River, Strea	/Land within	Property,	
G Ó.	Acreage / O	Lot Size	0) M	Towp of:	N, Range O 6 W	50	, Township	Section /
		Subdivision:	Block(s) No.	Lot(s) No.	Vol & Page	Lot Lot(s) CSM	Gov't Lot	_ 1/4	NW 1/4, NW
(s)	Page(s)		2 02-000-44	-11-90-	2 -50	(Use Tax Statement) 04- 0 j 0 =		Legal Description:	PROJECT LEGAL
□ No	Yes No				digital .	DIN.	The state of the s		
Written Authorization	Written A	ite/Zip):	Address (include City/State/Zip):	Agent Mailing /		of Owner(s)) Agent Phone	ation on behalf	ning Applic	Authorized Agent: (Person Signing Application on behalf of Owner(s))
Phone:	Plumber Phone:			Plumber:	Contractor Phone: Pl	Contra	•	7	Contractor: Owner
09-063			54827	H	Cornucopia,	City/State/Zip:		?	Address of Property:
C+25-24	242 (212) 426.	245	Cornucopics,	()	87140 CTY AWY		Perry	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	R. Carles
OTHER	B.O.A. DO	U USE	JAL USE ☐ SPECIAL USE	CONDITIONAL USE	□ PRIVY	□ SANI	☐ LAND USE	₽₩	TYPE OF PERMIT REQUESTED-
ty.org/zoning/as	www.bayfieldcount	our websits	HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/as	N BOTFILL OU	·	E BEEN ISSUED TO APPLICAL	PERMITS HAVE	MILL ALL	DO NOT START CONSTRUCTION L
	* * 1.1.	.		70 Dept.		artment.	ty Zoning Depa	field Coun	Checks are made payable to: Bayfield County Zoning Department.

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

an the Deed All Owners must sign or letter(s) of authorization must accompany this application)

FARLURE TO OBTAIN A PERMIT of STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES are companying information) has been examined by me (us) and to the best of my four) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) you all information I (we) are (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which this information I (we) am (are) providing in that it will be relied upon by Bayfield County officials charged with administering county ordinances to have access to the purpose of providing in the purpo

Owner(s): (If there are Multiple

Authorized Agent:

Address to send permit

Date

Date

Setback from the North Lot Line
Setback from the South Lot Line
Setback from the West Lot Line
Setback from the East Lot Line Setback to Privy (Portable, Composting)

Prior to the plazement or construction of a structure within ten (10) feet of the other previously surveyed comer or marked by a licensed surveyor at the own Setback to Septic Tank or Holding Tank Setback to Drain Field from the North Lot Line from the Centerline of Platted Roar from the Established Right-of-Way 8 nent or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from reversed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be set surveyor at the owner's expense. Setbacks: (measured to the closest point) Centerline of Platted Road Description 000 2000 11000 11000 Measurement Feet Feet Feet Feet Feet Setback from the Lake (ordinary high-water Setback from the River, Stream, Creek Setback from the Bank or Bluff dary line from which the Setback to Well Elevation of Floodplain Setback from 20% Slope Area Setback from Wetland Description measured must be visible from mark) one previously surveyed Measurement O Feet Feet Feet Feet

Please complete (1) -- (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

or to the placement or e previously surveyed o irked by a licensed sun (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling. The local Town, Village, City, State or Federal agencies may also require permits. Dwelling Code

Hold For Sanitary: Hold For TBA:	Signature of Inspector: APPROVED JOSEMILS:	Condition(s): Town, Committee or Board Conditions Att. PULLO 1-12 SHALL NOT BE 1 NOBOK PL WAZITZ +	Date of Inspection: 4, 14, 13	Inspection Record: Gile marked by stakes	Was Parcel Legally Created XYes □ No	Granted by Variance (B.O.A.) □ Yes. □ No. Case #: ►	Is Parcel a Sub-Standard Lot Yes (Deed of Record) Is Parcel in Common Ownership Yes (Fused/Comiguous Lot(s)) Is Structure Non-Conforming Yes	Permit# 13-0321	Permit Denied (Date):	Issuance Information (County Use Only)
Hold For Affidavit: Hold For Fees:	ED JOSEMITS:	Condition(s): Town, Committee or Board Conditions Attached? I Yes I No -(If No they need to be attached.) Paulo Ita State Not FE USEO FOR TUNNYON HAS TALLON Paulo Ita State Not FE USEO FOR TUNNYON HAS TALLON Paulo Ita State Not FE USEO FOR TUNNYON HAS TALLON Paulo Ita State Not FE USEO FOR TUNNYON HAS TONE SOURCE	Inspected by: J. CROONBOOK MUMPHY	taker	Were Property Lines	Previously Granted by Variance (B.O.A.) □ Yes □ No	よ Lot(s)) 文 No Mitigation Required 日Yes Mitigation Attached 日Yes	Permit Date: 9-20-/3	Reason for Denial:	Sanitary Number: # of bedrooms:
255.	Date of Approval: 20.13	tation rose that	Date of Re-Inspection:	Zoning District (木:[) Lakes Classification (山井)	Represented by Owner	Case #: N	Affidavit Attached			ns: Sanitary Date: